

# C.A.S.T. For Kids

## REGISTRATION FORM

June 19, 2010  
8:00 a.m. to 2:00  
Packers Bay Marina

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Disability: \_\_\_\_\_

Youth T-shirt size: \_\_\_\_\_S \_\_\_\_\_M \_\_\_\_\_L \_\_\_\_\_XL \_\_\_\_\_XX

At Reclamation-sponsored events, programs, and activities, volunteers may take photographs, videos, and/or audio clips of youth and adult participants. These materials may be used for agency brochures, Web site content, newsletters, newspapers, and other not-for-profit purposes. C.A.S.T. For Kids Foundation and Reclamation requests the right to use all photos, videos, and/or audio clips taken of youth and adults involved in such programs and activities.

By signing this form I understand and agree to the above request and conditions. I sign this form freely and without inducement.

### Contact Information (Please print)

Parent's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_

### Objection Right

I object to the use of the above individual( s) name, likeness, and/or voice in any manner described above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return by May 21, 2010 to: C.A.S.T. For Kids  
16349 Shasta Dam Boulevard  
Shasta Lake, CA 96019  
Fax 530-275-2441



